

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	S. Z		08-09-01
O.I.P.E. CLASSIFIER		49	8/16/01
FORMALITY REVIEW	AM	917	09-12-01
RESPONSE FORMALITY REVIEW	<i>[Signature]</i>	6091	01/16/02

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final	
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1	10-28-02
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Claim	Date
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If more than 150 claims or 10 actions  
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1-17-02  
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